PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRICTIONS. This form should be used for transmitting the ISSUE FEE and PUBLICATION IEEE (if required). Blacks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address; an indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees condifications.

CURRENT CORRESPONDENCE ADDRESS (None Use Block I for any change of address)

Note: A certificate of mailing can only be used for of consensit mailings of the Fees) Transmittal. This certificate control be usef of any other accompanying papers. Each additional paper, such as an assignment of formal drawing, must have its own certificate of mailing our transmission.

25537				C410	: E M						
VERIZON PATENT MAN 1320 North Cou	Certificate of Mailing or Transmission I hereby certify that this Feech or Transmission States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facismile transmitted to the USPTO (571) 273-2885, on the date indicated below.										
9th Floor ARLINGTON, V	Eddy Va /Eddy Va.			erde		(Depositor's na	me)				
AREANOTON, VA 22201-2505				Lverde/		(Signat	ure)				
				Į	Se	eptember	15,	2010	(D	rate)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR			Α	ATTORNEY DOCKET NO.		CONFIRMATION NO.	П	
09/909,784 07/23/2001				Dale L. Bartholomew			VE22	.20CON	4891	_	
TITLE OF INVENTION	: TRANSPORT OF CA	LLER IDE	NTIFICATION	N INFORMATION TH	ROUGI	H DIVERSE COM	MMUNIC	ATION NETWO	RKS		
APPLN. TYPE	SMALL ENTITY	ISSUE	FEE DUE	PUBLICATION FEE DUE		REV. PAID ISSUE F	FEE TOTAL FEE(S) DUE		DATE DUE	٦	
nonprovisional	NO	s	1510	\$0		\$2950		\$1510	09/22/2010	_	
EXAM	AR	T UNIT	CLASS-SUBCLASS								
DUONG	2467		370-352000								
1. Change of correspondence address or indication of "Fee Address" (37				2. For printing on the	For printing on the patent front page, list						
CFR 1.363). Change of correspondence address (or Change of Correspondence				(1) the names of up to 3 registered patent attorneys or agents OR, alternatively.							
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				(2) the name of a single firm (having as a member a 2							
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 listed, no name will be printed.							
3. ASSIGNEE NAME A										_	
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.											
(A) NAME OF ASSIG	(B) RESIDENCE: (CITY and STATE OR COUNTRY)										
Verizon Services Corp.				Ashburn, VA							
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🔯 Corporation or other private group entity 🚨 Government											
4a. The following fee(s)	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)										
☑ Issue Fee ☐ Publication Fee (No small entity discount permitted)				☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.							
Advance Order - # of Copies				□ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number							
5. Change in Entity Stat	han (forms status in disease	d alexand		overpayment, to D	posit /	Account Number	07-2	347 (enclose ar	extra copy of this forn	1).	
	tus (from status indicate s SMALL ENTITY stati		FR 1.27.	☐ b. Applicant is no	onger o	claiming SMALL	ENTITY	status. See 37 CF	R 1.27(g)(2).		
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req ecords of the United Sta	uired) will i ites Patent a	not be accepte nd Trademark	d from anyone other th Office.	n the a	applicant; a registe	ered attorn	ey or agent; or th	e assignee or other part	y in	
Authorized Signature	/		Date Sep	temb	er 15, 2	010					
Typed or printed name	lmieri			Registration No.							
This collection of inform an application. Confident submitting the complete this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	ation is required by 37 C tiality is governed by 35 I application form to the ons for reducing this bu irginia 22313-1450. DO 13-1450.	CFR 1.311. U.S.C. 122 USPTO, 7 rden, should D NOT SEN	The information and 37 CFR ime will vary be sent to the DFEES OR	on is required to obtain 1.14. This collection is depending upon the in e Chief Information Of COMPLETED FORMS	or retai estima dividu: ficer, U TO TI	in a benefit by the sted to take 12 mir al case. Any com J.S. Patent and Tr HIS ADDRESS. S	public wh nutes to co ments on t ademark O SEND TO:	ich is to file (and implete, includin he amount of tin Office, U.S. Depe Commissioner I	by the USPTO to proc g gathering, preparing, ne you require to comp atment of Commerce, I or Patents, P.O. Box 1-	ess) and lete '.O.	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.